

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	BA	70385	
O.I.P.E. CLASSIFIER		43	9/11/02
FORMALITY REVIEW	ll	823	10/11
RESPONSE FORMALITY REVIEW			

# INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 - ..... Restricted      O ..... Objected

Claim	Date
Final Original	9/21/02
1	✓
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22	✓
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31	
32	
33	
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36	✓
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43	
44	
45	✓
46	
47	
48	
49	
50	✓

Claim	Date
Final Original	9/21/02
51	✓
52	✓
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61	✓
62	
63	
64	
65	
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71	✓
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93	✓
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99	
100	✓

Claim	Date
Final Original	9/21/02
101	✓
102	
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110	✓
111	
112	
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131	
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133	
134	
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137	✓
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If more than 150 claims or 10 actions  
 staple additional sheet here

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